SUNDAY SCHOOL

Preschool - 8th Grade

10:05 - 11:05am

NAME	Grade	Date of Birth	
NAME	Grade	Date of Birth	
NAME	Grade Home	Date of Birth	
PARENT	phone		
	Work		
Address	Phone		
	Cell		
	Phone		
Email			
Emergency	Emergency		
contact	Phone		
Allergies			
Restrictions/			
Special concerns			

Authorization I hereby give informed and expressed consent for this individual to take part in all Immanuel Lutheran activities under supervision, and agree that Immanuel Lutheran or Immanuel personnel will not be held responsible for accidents arising therefrom. I authorize the Immanuel Lutheran's Health Care Provider and/or designated staff to provide appropriate treatment to this individual for injuries and/or illness. This includes but is not limited to, following Immanuel Lutheran's medical procedures and protocols, following poison control recommendations, administering prescription and over-the-counter medications as noted above, transportation to the clinic or hospital care and following directions from the medical director. I understand that the information on this form may be released to the appropriate medical personnel in case of an emergency. I agree to pay any cost for medical care in the event of an emergency, even if I do not have health insurance coverage or not all costs covered by insurance. I also understand that failure to disclose medical or emotional problems in advance may lead to serious consequences while at Immanuel Lutheran Church. I verify that everything contained on this form is complete and accurate, to the best of my knowledge. I hereby give my consent to Immanuel Lutheran to use photographs/video taken during this event in printed materials, slideshows, and on the church website and Facebook page.

Parent/Guardian	
Signature	Date

SUNDAY SCHOOL - Begins Sunday, September 10th Immanuel Lutheran Church 2300 27th Street Spirit Lake, Iowa 712-336-1010

Email: lcmslakes@gmail.com
Free to all. We welcome all visitors!
Return to the church office.